## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10723967

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			38				-	RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUME	BER EXTRA	ĺ	BASIC FEE	385.00	OR	BASIC FEE	770.00
ТС	TAL CHARGE	ABLE CLAIMS	3 minus 20=		*	18		X\$ 9=		1	X\$18=	32.4
ואו	DEPENDENT C	I AIMS	# minus 3 =		*					OR		01
_		NDENT CLAIM P			/			X43=		OR	X86=	0,6
								+145=		OR	+290=	
* If the difference in column 1 is less than zero, ente					"0" in c	column 2		TOTAL		OR	TOTAL	1180
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 2)						(Column 3)		SMALL	ENTITY	OR	OTHER SMALL I	
⋖		CLAIMS REMAINING		HIGHI NUME	EST BER	PRESENT		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
AMENDMENT		AFTER AMENDMENT		PREVIC PAID I		EXTRA		DATE	FEE		DATE	FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent			***		=		X43=		OR	X86=	
	FIRST PRESE	ENTATION OF ME	JLTIPLE DEF	PENDENT	CLAIM		ŀ	+145=		OR	+290=	
							L	TOTAL		ا <sub>مہ</sub> ا	TOTAL	
(Column 1) (Column 2) (Column 3)								ADDIT. FEE			ADDIT. FEE	<u> </u>
~		CLAIMS		HIGH	EST		1 r		ADDI-	1	1	ADDI-
ENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
<b>AMENDMENT</b>	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
<b>AME</b>	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J ┞	.145			. 200	···-
							L	+145= TOTAL		OR	+290= TOTAL	
							A	DDIT. FEE		OR ,	ADDIT. FEE	
	•	(Column 1)		(Colum		(Column 3)						
AMENDMENT C		REMAINING AFTER AMENDMENT	, .	NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	,	OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
* #	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+145= TOTAL		OR	+290=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE	
i	he "Highest Num	ber Previously Paid	For" (Total or	Independer	nt) is the	highest number	r foun	nd in the app	ropriate box	in colu	ımn 1.	

FORM PTO-875 (Rev. 10/03)